DECLARATION AND POWER OF ATTORNEY

Attorney's Docket No. 1642

As a below named inventor, I by declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names).

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e specification of which (check one) is attached hereto.	. १५ १ ६ ५५ ० -	The first control of the device of the control of t		***************************************
XX was filed on February 3, 4	987 as Application Serial No	010,22	25	ind was amended
I hereby state that I have reviewed and under any amendment referred to above. I acknowledge the duty to disclose information of the state of the st	ion which is material to the exam r Title 35, United States Code, § 1 ow any foreign application for pa	ination of this app 19 of any foreign tent or inventor's	lication in accordance	e with Title 37, Co
	PRIOR FOREIGN APPLICA	ATION(S)		T
COUNTRY	APPLICATION N	IUMBER	DATE OF FILING (day, month, year)	PRIORITY Claimed Unde 35 U.S.C. 119
NONE		·		YES NO _
				YES NO _
APPLICATION SERIAL NUMBER	FILING DATE	STATUS	(PATENTED, PENDI	NG, ABANDONE
NONE				
I hereby declare that all statements made he believed to be true; and further that these state punishable by fine or imprisonment, or both tements may jeopardize the validity of the apparents of the apparents of the part of the part and trademar law in the patent law in the paten	tements were made with the knon, under Section 1001 of Title to plication or any patent issued the hereby appoint the following attack Office connected therewith. (Ill.)	wledge that willfu8 of the United Sereon.	il false statements ar states Code and that states Code and that	nd the like so ma such willful fal
END CORRESPONDENCE TO:		erroraniaaniaaniaania niitee se erroraariillee	DIRECT TELEPHI	ONE CALLS TO
Pavid O'Reilly 23603 Park Sorrento, Suit	te #103		(name and tele	phone No.1
Calabasas, CA 91302			(818)883-	eilly
Calabasas, CA 91302	Inventor's Signature:	7 On	(818) 883-	eilly

Daten L	-2-87	inventor's Signature:	rel no vir	
FULL NAME OF INVENTOR	Last Name Fernandez	First Name Helen	Middle Name M .	
RESIDENCE &	City Woodland Hills	State or Foreign Country California	Country of Citizenship U.S.A.	
POST OFFICE ADDRESS	Sireet & No 20938 Bandera Street	Woodland Hills	State or Country California	Z ip Code 91364
Dated		Inventor's Signature;		
FULL NAME OF INVENTOR	Last Name	First Name	Middle Name	
RESIDENCE &	City	State or Foreign Country	Country of Citizenship	
POST OFFICE ADDRESS	Street & No	City	State or Country	ZIp Code





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GROUP 230

Applicant o	or Patentee:	Helen M.	Fernan	dez		Attorney's	
Serial or P	Patent No.:	010.225				Docket No.:	1642
Filed or 1s	sved:	February	3, 198	7			
For:	SK	IN MOISTÚE	TZING	PRODUCT	AND PE	ROCESS	

VERUFIED STATEMENT (DECLARATION) CLAIMING SMALL, ENTITY STATUS (37 CFR 1.9(5) and 1.27(b)) - INDICIPALIENT INVENTOR

as defined in 37 (and (b) of Title :	nventor, I hereby declare that I qualify as an independent inventor TR 1.9(c) for purposes of paying reduced fees under section 41(a) is, United States Code, to the Patent and Trademark Office with intion entitled SKIN MOISTURIZING PRODUCT AND PROC	ESS
quircitipeq in	_	

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a)
and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled SKIN MOISTURIZING PRODUCT AND PROCESSING OF THE PROCESSING O
() the specification filed herewith [X]X application serial no. 010,225 filed February 3, 1987 () patent no, issued
I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).
Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:
<pre>XX no such person, concern, or organization () persons, concerns or organizations listed below*</pre>
THORE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)
FULL NAME
ADDRESS DADIVIDUAL SHALL BUSINESS CONCERN) HARPREFIT ORGANIZATION
FULL NAME
ALDRESS DOIVIDUAL SWILL BUSINESS CONCIDEN NORTHOR IT ORCHATZATION
FULL NAME
ADDRESS () DIDIVIDUAL .) SHALL BUSINESS CUNCIEN !) NONPHOLIT CHEANIZATION
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue for or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.
Helen M. Fernandez

Signature of Inventor Signature of Inventor Signature of Inventor Date